

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|--------------------|--------|---------|
| FEE DETERMINATION | <i>[Signature]</i> | | 1-29-00 |
| O.I.P.E. CLASSIFIER | <i>[Signature]</i> | | 2/1/00 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |
| | <i>[Signature]</i> | 04840 | 3-3 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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